Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 1 of 55

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify Yourself | | | |
|-----|---|---|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Victor First name | | First name |
| | license or passport). | Middle name | - | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Jimenez Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9971 | | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 2 of 55

Case number (if known)

Debtor 1 Victor A. Jimenez

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 3012 N. Kenneth Ave. Chicago, IL 60641 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this above, fill it in here. Note that the court will send any notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Entered 01/11/16 10:17:55
Page 3 of 55 Doc 1 Filed 01/11/16 Desc Main Case 16-00677

Document Case number (if known) Debtor 1 Victor A. Jimenez

| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. | | | |
|--------------|---|-----------|--|--|---|---|--|--|--|
| | choosing to file under | Chapter 7 | | | | | | | |
| | | □с | hapter 11 | | | | | | |
| | | □с | hapter 12 | | | | | | |
| | | □с | hapter 13 | | | | | | |
| 8. | How you will pay the fee | • | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | | |
| | | | I need to pay The Filing Fe | the fee in inst e in Installment | tallments. If you choose this options (Official Form 103A). | on, sign and attach the Application for Individuals to Pay | | | |
| | | | I request that but is not req applies to you | t my fee be wa uired to, waive y ur family size an | lived (You may request this option your fee, and may do so only if you do you are unable to pay the fee in | n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out clail Form 103B) and file it with your petition. | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No | - | | | | | | |
| | lact o youro. | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| I 0 . | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No | - | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No | Go to I | ne 12. | | | | | |
| | residerice : | □ Ye | es. Has yo | ur landlord obta | ained an eviction judgment agains | t you and do you want to stay in your residence? | | | |
| | | | | No. Go to line | 12. | | | | |
| | | | | Vac Fill out In | itial Ctatamant Abant an Frietian | Judgment Against You (Form 101A) and file it with this | | | |

Debtor 1 Victor A. Jimenez

Document Page 4 of 55

Case number (if known)

| art | 3: Report About Any Bu | sinesses ` | You Own as a Sole | Proprietor | | | | |
|-----|---|---|--|---|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | | |
| | | ☐ Yes. | Name and locati | on of business | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of busines | ss, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, | City, State & ZIP Code | | | | |
| | it to this petition. | | Check the appro | ppriate box to describe your business: | | | | |
| | | | ☐ Health C | are Business (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | ☐ Single A | sset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | ☐ Stockbro | oker (as defined in 11 U.S.C. § 101(53A)) | | | | |
| | | | ☐ Commod | dity Broker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | ■ None of | the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | or 11, the court must know whether you are a small business debtor so that it can set appropriate it you are a small business debtor, you must attach your most recent balance sheet, statement of ent, and federal income tax return or if any of these documents do not exist, follow the procedure | | | | | | |
| | For a definition of small | No. | I am not filing ur | I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | - | | | | | |
| | | ☐ Yes. | I am filing under | Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| art | 4: Report if You Own or | Have Any | Hazardous Prope | rty or Any Property That Needs Immediate Attention | | | | |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and | own or have any that poses or is to pose a threat Yes. | | | | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | If immediate attent needed, why is it n | ion is | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the prope | orty? | | | | |
| | 9 | | | Number, Street, City, State & Zip Code | | | | |

Debtor 1 Victor A. Jimenez

Document Page 5 of 55

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Counseling because of

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 6 of 55 Case number (if known) Debtor 1 Victor A. Jimenez Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 □ 200-999 19. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your assets to □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million to be? □ \$50,000,001 - \$100 million **\$100.001 - \$500.000** \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Victor A. Jimenez Signature of Debtor 2 Victor A. Jimenez

Executed on

MM / DD / YYYY

Signature of Debtor 1

January 11, 2016

MM / DD / YYYY

Executed on

Debtor 1 Victor A. Jimenez

Document Page 7 of 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Richard | d Fonfrias | Date | January 11, 2016 |
|-------------------|------------------------|---------------|-------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Richard Fo | onfrias | | |
| Printed name | | | |
| | aw Group, LLC | | |
| Firm name | | | |
| 70 West M | ladison | | |
| Suite 1400 | | | |
| Chicago, I | L 60602 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 3129690730 | Email address | rfonfrias2025@gmail.com |
| | | | |
| Bar number & S | tate | | |

| | | 1700.11111 | ani Paue o ui oo | |
|---|-------------------------|-------------------|------------------|-------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Victor A. Jimenez | 2 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Che |
| | | | | ame |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|----|--|-------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 189,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 13,974.92 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 202,974.92 |
| Pa | tt 2: Summarize Your Liabilities | | |
| | | | abilities it you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 229,311.41 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 59,570.00 |
| | Your total liabilities | \$ | 288,881.41 |
| Pa | rt 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,664.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,584.00 |
| Pa | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Doc 1 Document

Page 9 of 55
Case number (if known) Debtor 1 Victor A. Jimenez

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,269.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|--|-----------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 6,217.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 6,217.00 |

| | C | ase 16-00677 | Doc 1 | Filed 01/11/16 Document | Entere Page 10 | d 01/11/16 10:17:5) of 55 | 5 Des | sc Main | |
|----------------------------|--|--|---|--|--------------------------------|--|--|---|--|
| ill | in this info | rmation to identify you | ur case and th | | | | | | |
| Deb | otor 1 | Victor A. Jimen | - | Name | Last Name | | | | |
| | otor 2 use, if filing) | First Name | Middle | Name | Last Name | | | | |
| Uni | ted States E | Bankruptcy Court for the | : NORTHER | N DISTRICT OF ILLIN | IOIS | | | | |
| Cas | se number | | | | - | | | ☐ Check if this is an amended filing | |
| SC n ea hink nfor | chedu ch category ti fits best. | Be as complete and accu ore space is needed, atta | ribe items. List a | e. If two married people | are filing tog | more than one category, list tl ether, both are equally respon dditional pages, write your nan | sible for su | pplying correct | |
| | No. Go to F | r have any legal or equita Part 2. e is the property? | ble interest in a | ny residence, building, | land, or simil | ar property? | | | |
| 1.1 | 3012 N. | Kenneth Ave. | | What is the property Single-family h | | | secured cla | ims or exemptions. Put | |
| | Street address, if available, or other description | | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative | | the amount of Creditors Who | any secured | ny secured claims on Śchedule D: Have Claims Secured by Property. | | |
| | Chicago | IL 6 | 0641-0000 | ☐ Land | or mobile hom | entire proper | ty? | Current value of the portion you own? | |
| | City | State | ZIP Code | ☐ Investment pro ☐ Timeshare ☐ Other Who has an interest one. ☐ Debtor 1 only | | Describe the | simple, tena if known. | \$189,000.00 our ownership interest ancy by the entireties, or | |
| | Cook | | | Debtor 2 only | | · | | | |
| | County | | | Debtor 1 and I At least one of Other information you property identificati | the debtors ar | | ructions) I 74sf - neth | munity property | |
| 2. | | ollar value of the portion | | | rom Part 1, i | ncluding any entries for | | \$189,000.00 | |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here.....

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Page 11 of 55

Case number (if known) Document Debtor 1 Victor A. Jimenez 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **Toyota** Who has an interest in the property? Check one. 3 1 Make: the amount of any secured claims on Schedule D: **Prius** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2013 Debtor 2 only Current value of the Current value of the Approximate mileage: 55000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another **Good Condition** \$12,300.00 \$12,300.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$12,300,00 you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Sofa, Loveseat, Entertainment Center, Television, Tables, Chairs, \$850.00 Lamps **Dining Table & Chairs** \$85.00 Beds & Bedding, Bedroom Furnishings \$120.00 \$80.00 Various Household Tools Cookware, Silverware, Flatware \$45.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No

Case 16-00677

Doc 1

Filed 01/11/16

Entered 01/11/16 10:17:55

Desc Main

| | Case 16-0 | 0677 | Doc 1 | Filed 01/11/16 | Entered 01/11/16 10:17:55 | Desc Main |
|--------------------------|---|--------------|-----------------|--------------------------|--|---|
| Debtor 1 | Victor A. Jim | enez | | Document | Page 12 of 55 Case number (if known) | |
| ☐ Yes. | Describe | | | | | |
| 10. Firearn | | shotauns | s ammunition | n, and related equipmen | f | |
| ■ No | 700. T 10.010, Time 0 | , onorganic | o, arriirarii | i, and related equipmen | • | |
| ☐ Yes. | Describe | | | | | |
| 11. Clothes Examp □ No | | thes, furs, | , leather coats | s, designer wear, shoes | , accessories | |
| _ ::: | Describe | | | | | |
| | | Various | Clothing | | | \$210.00 |
| □ No [′] | | velry, costu | ume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, gems, | gold, silver |
| | | Weddin | ng Ring | | | \$200.00 |
| | | Watche | es . | | | \$50.00 |
| 15. Add t | | of all of yo | our entries fr | om Part 3, including a | ny entries for pages you have attached | \$1,640.00 |
| | scribe Your Financ | | | | | |
| Do you ow | n or have any le | gal or equ | uitable intere | est in any of the follow | ing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | | | | our home, in a safe dep | osit box, and on hand when you file your petit | on |
| | | | | | Cash | \$20.00 |
| Examp □ No | | | | counts with the same ins | name: | houses, and other similar |
| | | 17.1. | | Checking xxxx7375 | g Account - Bank of America - Acct: | \$14.92 |
| Examp ■ No | , mutual funds, o bles: Bond funds, i | investmen | | ith brokerage firms, mor | ney market accounts | |

Official Form 106A/B

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 13 of 55 Case number (if known)

| 19. | joint venture | ock and interests in incorp | porated and unincorporated busine | sses, including an interest ir | n an LLC, partnership, and |
|-----|--|---------------------------------------|--|----------------------------------|--|
| | ■ No | | | | |
| | ☐ Yes. Give specific info | rmation about them Name of entity: | | % of ownership: | |
| 20. | Negotiable instruments i | include personal checks, ca | otiable and non-negotiable instrum ashiers' checks, promissory notes, and ransfer to someone by signing or deliv | d money orders. | |
| | ☐ Yes. Give specific info | rmation about them Issuer name: | | | |
| 21. | Retirement or pension a Examples: Interests in If | | 403(b), thrift savings accounts, or oth | er pension or profit-sharing pla | ans |
| | ☐ Yes. List each account | separately. Type of account: | Institution name: | | |
| 22. | Examples: Agreements | deposits you have made s | so that you may continue service or us t, public utilities (electric, gas, water), t | | s, or others |
| | ■ No □ Yes | | Institution name or individual: | | |
| 23. | Annuities (A contract for ■ No | a periodic payment of mor | ney to you, either for life or for a numb | er of years) | |
| | Yes Iss | uer name and description. | | | |
| 24. | Interests in an education 26 U.S.C. §§ 530(b)(1), 5 ■ No | | qualified ABLE program, or under a | qualified state tuition progr | am. |
| | | titution name and description | on. Separately file the records of any i | nterests.11 U.S.C. § 521(c): | |
| | ■ No | | other than anything listed in line 1) | , and rights or powers exerc | isable for your benefit |
| | Yes. Give specific info | | and other intellectual property | | |
| | | ain names, websites, proce | eeds from royalties and licensing agree | ements | |
| 27. | | nd other general intangib | | | |
| | ■ No | | operative association holdings, liquor l | icenses, professional licenses | |
| | ☐ Yes. Give specific info | | | | Current value of the |
| IVI | oney of property owed to | , you: | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you ■ No | | | | |
| | ☐ Yes. Give specific info | rmation about them, includi | ng whether you already filed the return | ns and the tax years | |
| 29. | Family support Examples: Past due or le No | ump sum alimony, spousal | support, child support, maintenance, | divorce settlement, property se | ettlement |
| | ☐ Yes. Give specific info | rmation | | | |

Official Form 106A/B Schedule A/B: Property page 4

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Page 14 of 55

Case number (if known) Document Debtor 1 Victor A. Jimenez 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$34.92 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Page 15 of 55

Case number (if known)

Document Debtor 1 Victor A. Jimenez

| 55. | Part 1: Total real estate, line 2 | | | \$189,000.00 |
|-----|--|-------------|------------------------------|--------------|
| 56. | Part 2: Total vehicles, line 5 | \$12,300.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,640.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$34.92 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$13,974.92 | Copy personal property total | \$13,974.92 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$202,974.92 |

Official Form 106A/B Schedule A/B: Property page 6

| | | Docume | ent Page 16 of 55 | |
|------------------------|--------------------------|-------------------|-------------------|------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Victor A. Jimene | z | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Fo | orm 106C | | | |

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | art 1: Identify the Property You Claim as E | xempt | | | | | | | | |
|----|--|--------------------------------------|-----------------------------------|---|------------------------------------|--|--|--|--|--|
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | ur spouse is filing with you. | | | | | | |
| | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | | | |
| | ☐ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | | | | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | | | | |
| | 3012 N. Kenneth Ave. Chicago, IL 60641 Cook County | \$189,000.00 | | \$15,000.00 | 735 ILCS 5/12-902 | | | | | |
| | Debtor Residence - 2074sf - 4 Bdrm - 2 Bath Location: 3012 N. Kenneth Ave., Chicago IL 60641 Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | 2013 Toyota Prius 55000 miles Good Condition | \$12,300.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | | | | | |
| | Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Sofa, Loveseat, Entertainment Center, Television, Tables, Chairs, | \$850.00 | | \$850.00 | 735 ILCS 5/12-1001(b) | | | | | |
| | Lamps Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Dining Table & Chairs Line from Schedule A/B: 6.2 | \$85.00 | | \$85.00 | 735 ILCS 5/12-1001(b) | | | | | |
| | Line Horr Schedule PVD. 0.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 17 of 55

Victor A. Jimenez Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Beds & Bedding, Bedroom 735 ILCS 5/12-1001(b) \$120.00 \$120.00 **Furnishings** Line from Schedule A/B: 6.3 100% of fair market value, up to any applicable statutory limit **Various Household Tools** 735 ILCS 5/12-1001(b) \$80.00 \$80.00 Line from Schedule A/B: 6.4 100% of fair market value, up to any applicable statutory limit Cookware, Silverware, Flatware 735 ILCS 5/12-1001(b) \$45.00 \$45.00 Line from Schedule A/B: 6.5 100% of fair market value, up to any applicable statutory limit **Various Clothing** 735 ILCS 5/12-1001(a) \$210.00 \$210.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Wedding Ring 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 12.1 П 100% of fair market value, up to any applicable statutory limit **Watches** 735 ILCS 5/12-1001(b) \$50.00 \$50.00 Line from Schedule A/B: 12.2 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking Account - Bank of America** 735 ILCS 5/12-1001(b) \$14.92 \$65.58 - Acct: xxxx7375 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

| | | Document | Page 18 | of 55 | | |
|---------------------------------------|-------------------|--|--------------------|--|--------------------------|-------------------|
| Fill in this information to | identify you | r case: | | | | |
| Debtor 1 Victor | r A. Jimene | 27 | | | | |
| First Nar | | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) First Nar | me | Middle Name | Last Name | | | |
| United States Bankruptcy (| Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | | |
| | | | | | | |
| Case number | | | | | | |
| (if known) | | | | | _ | if this is an |
| | | | | | amend | led filing |
| Official Form 106D |) | | | | | |
| | - | What lave Claims | C · · · - · | d by Duanau | L | 40/45 |
| Schedule D: Cr | eartors | Who Have Claims | Secured | a by Propert | .y | 12/15 |
| is needed, copy the Additiona | | f two married people are filing togethout, number the entries, and attach it t | | | | |
| number (if known). | | | | | | |
| 1. Do any creditors have clain | ns secured by | your property? | | | | |
| ☐ No. Check this box a | and submit th | is form to the court with your other | schedules. Yo | ou have nothing else t | o report on this form. | |
| Yes. Fill in all of the | information b | pelow. | | | | |
| Part 1: List All Secured | d Claims | | | | | |
| | | nore than one secured claim, list the cre | ditor congretely | Column A | Column B | Column C |
| | | a particular claim, list the other creditors | | Amount of claim | Value of collateral | Unsecured |
| much as possible, list the claim | ns in alphabetion | cal order according to the creditor's nam | e. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 Bk Of Amer | | Describe the property that secures t | he claim: | \$148,317.00 | \$189,000.00 | \$0.00 |
| Creditor's Name | | 3012 N. Kenneth Ave. Chicag | | <u> </u> | | |
| | | 60641 Cook County | | | | |
| | | Debtor Residence - 2074sf - | 4 Bdrm | | | |
| | | - 2 Bath | | | | |
| | | Location: 3012 N. Kenneth A Chicago IL 60641 | .ve., | | | |
| 4000 T | ъ. | As of the date you file, the claim is: | Check all that | | | |
| 1800 Tapo Canyo Simi Valley, CA 93 | | apply. | | | | |
| | | Contingent | | | | |
| Number, Street, City, State & | & Zip Code | Unliquidated | | | | |
| Who owes the debt? Check | one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ | | ☐ An agreement you made (such as r | nortgage or sec | ured | | |
| ■ Debtor 1 only ■ Debtor 2 only | | car loan) | nongago or coo | diod | | |
| Debtor 1 and Debtor 2 only | , | ☐ Statutory lien (such as tax lien, med | chanic's lien) | | | |
| ☐ At least one of the debtors | | ☐ Judgment lien from a lawsuit | manic 3 lich) | | | |
| ☐ Check if this claim relates | | Other (including a right to offset) | | | | |
| community debt | | — Other (including a right to onset) | | | | |
| 0. | pened | | | | | |
| • | 02/10 | | | | | |
| | st Active | | | | | |
| Date debt was incurred 10 | /19/15 | Last 4 digits of account numb | per 9766 | | | |
| | | | | | | |
| 2.2 Office of Housing | FHA | Describe the property that secures t | ho claim: | \$59,530.41 | \$189,000.00 | \$18,847.41 |
| Creditor's Name | | 3012 N. Kenneth Ave. Chicag | | | | |
| | | 60641 Cook County | JO, IL | | | |
| | | Debtor Residence - 2074sf - | 4 Bdrm | | | |
| | | - 2 Bath | | | | |
| Director of Mortga | age | Location: 3012 N. Kenneth A | ve., | | | |
| Insurance Acc. | | Chicago IL 60641 As of the date you file, the claim is: | Chack all that | | | |
| 451 Seventh Stree | | apply. | SHECK All MIAL | | | |
| Washington, DC 2 | | Contingent | | | | |
| Number, Street, City, State 8 | & Zip Code | Unliquidated | | | | |

Who owes the debt? Check one.

Official Form 106D

Nature of lien. Check all that apply.

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 19 of 55

| Debtor 1 Victor A. J | imenez | | Case | e number (if know) | | | |
|---|--|--|--------------------|----------------------------|--------------------------|-------------|--|
| First Name | Middle Na | ame Last Name | | · · · · · · · · · · | | | |
| ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the deb □ Check if this claim recommunity debt | tors and another | □ An agreement you made (such as more car loan) □ Statutory lien (such as tax lien, mechanology) □ Judgment lien from a lawsuit ■ Other (including a right to offset) | | | | | |
| community desi | | - | Lien | | | | |
| Date debt was incurred | 2014 | Last 4 digits of account number | 1703 | | | | |
| 2.3 Toyota Motor (| Credit | Describe the property that secures the | claim: | \$21,464.00 | \$12,300.00 | \$9,164.00 | |
| Creditor's Name | | 2013 Toyota Prius 55000 miles Good Condition | | | | | |
| 1111 W 22nd S Oak Brook, IL Number, Street, City, S | 60523 tate & Zip Code | As of the date you file, the claim is: Che apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. | ck all that | | | | |
| Who owes the debt? Check one. Debtor 1 only | | An agreement you made (such as mor car loan) | tgage or secured | | | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a | | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | | | | | |
| community debt Date debt was incurred | Opened 4/12/13 Last Active 9/16/15 | Last 4 digits of account number | 0001 | | | | |
| If this is the last page of Write that number here | of your form, add | olumn A on this page. Write that number the dollar value totals from all pages. r a Debt That You Already Listed | here: | \$229,311.4 \$229,311.4 | | | |
| trying to collect from you than one creditor for any debts in Part 1, do not fil | u for a debt you o of the debts that Il out or submit th | e notified about your bankruptcy for a de we to someone else, list the creditor in P you listed in Part 1, list the additional cr is page. | art 1, and then li | ist the collection agenc | y here. Similarly, if yo | u have more | |
| Name Address -NONE- | i | On | which line in | Part 1 did you ent | er the creditor? | | |
| | | | | ccount number | | | |

| | | Docu | ment Page | 20 of 55 | | | |
|------------------------------------|--|---|--|---|---------------------------------|-----------------------|----------------------|
| Fill in t | his information to identify your of | case: | | | | | |
| Debtor | *************************************** | | | | | | |
| Dobtor | First Name | Middle Name | Last Name | | | | |
| Debtor (Spouse if | | Middle Name | Last Name | | | | |
| Lloitod | Ctataa Dankeyntay Court for the | NORTHERN DISTR | | | | | |
| United . | States Bankruptcy Court for the: | NORTHERN DISTR | ICT OF ILLINOIS | | | | |
| Case n | | | | | | | |
| (if known) | | | | | | ck if thi | |
| | | | | | ame | nded fi | ling |
| Offici | al Form 106E/F | | | | | | |
| | edule E/F: Creditors | Who Have U | nsecured Cla | aims | | | 12/15 |
| | | | | d Part 2 for creditors with NONPRIOR | RITY claims. | List th | |
| Schedule Schedule eft. Attac | e G: Executory Contracts and Unexp e D: Creditors Who Have Claims Sec | ired Leases (Official Fo ured by Property. If mo | rm 106G). Do not includ re space is needed, cop | y contracts on Schedule A/B: Properi de any creditors with partially secure ny the Part you need, fill it out, numbe t, do not file that Part. On the top of a | d claims that or the entries | t are lis s in the | sted in boxes on the |
| Part 1: | List All of Your PRIORITY Un | secured Claims | | | | | |
| 1. [| Do any creditors have priority unsect | ured claims against you | ? | | | | |
| ı | No. Go to Part 2. | | | | | | |
| [| ☐ Yes. | | | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | | | |
| 3. [| Do any creditors have nonpriority un | secured claims against | you? | | | | |
| [| \square No. You have nothing to report in thi | is part. Submit this form t | o the court with your other | er schedules. | | | |
| | Yes. | | | | | | |
| | | | | | | | |
| ι r | unsecured claim, list the creditor separa | ately for each claim. For e | each claim listed, identify | or who holds each claim. If a creditor had type of claim it is. Do not list claim e more than three nonpriority unsecured | is already ind | cluded ir | n Part 1. If |
| | ago of Fare 2. | | | | To | otal clai | im |
| 4.1 | Advanced Lab Services | Last 4 dig | its of account number | inez | 9 | ò | 1,049.00 |
| | Priority Creditor's Name 501 Elmwood Ave. Sharon Hill, PA 19079 | When was | the debt incurred? | 2012 | | | |
| | Number Street City State Zlp Code | As of the | date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Conting | | | | | |
| | ■ Debtor 1 only | □ Conunç | geni | | | | |
| | Debtor 2 only | ☐ Unliqui | dated | | | | |
| | _ | _ | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Dispute | ed ONPRIORITY unsecure | d claim: | | | |
| | At least one of the debtors and and | — — | | a diami. | | | |
| | ☐ Check if this claim is for a commodebt | nunity | tioans | | | | |
| | Is the claim subject to offset? | | ions arising out of a sepa as priority claims | aration agreement or divorce that you di | d | | |
| | ■ No | ☐ Debts t | o pension or profit-sharir | ng plans, and other similar debts | | | |
| | Yes | Other. | Specify Medic | al | | | |
| 4.2 | Capital One Bank Usa N | Last 4 dig | its of account number | 4840 | 9 | | 2,384.00 |
| | Priority Creditor's Name | | | 0 1 0/00/00 | · | | |
| | 15000 Capital One Dr Richmond, VA 23238 | When was | the debt incurred? | Opened 8/02/09 Last Active 12/01/14 | | | |

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

| Dobto | Case 16-00677 Doc 1 | | | red 01/11/16 10:17:55 21 of 55 Case number (if know) | Desc Main | |
|--------|--|--|----------|--|-----------|----------|
| Debioi | 1 Victor A. Jimenez | | | Case number (if know) | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | — | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | L.L.L. | | |
| | At least one of the debtors and another | Type of NONPRIORITY uns | secure | i ciaim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | Obligations arising out of not report as priority claims | f a sepa | ration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit | t-sharin | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify C | Credit | Card | | |
| 4.3 | Cbna | Last 4 digits of account nu | ımber | 5550 | \$ | 1,770.00 |
| | Priority Creditor's Name | | | Opened 6/22/09 Last | | |
| | Po Box 6497 Sioux Falls, SD 57117 | When was the debt incurre | | Active 11/01/14 | | |
| | Number Street City State Zlp Code | As of the date you file, the | claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | _ | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY uns | secure | I claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of not report as priority claims | f a sepa | ration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit | t-sharin | g plans, and other similar debts | | |
| | Yes | Other. Specify | Charg | e Account | | |
| 4.4 | Chase | Last 4 digits of account nu | ımber | 2105 | \$ | 1,500.00 |
| | Priority Creditor's Name 11200 W Parkland Ave | When was the debt incurre | ed? | 2015 | | |
| | PO Box 3139 Milwaukee, WI 53201-3139 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the | claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY uns | secure | I claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of not report as priority claims | f a sepa | ration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit | t-sharin | g plans, and other similar debts | | |
| | Yes | Other. Specify | -oan | | | |
| 4.5 | Chase Card | Last 4 digits of account nu | ımber | 0248 | \$ | 980.00 |

Priority Creditor's Name

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Document

Page 22 of 55 Case number (if know) Debtor 1 Victor A. Jimenez

| | Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 2/16/12 Last Active 11/01/14 | | |
|-----|---|--|--|----|----------|
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | Obligations arising out of a sep not report as priority claims | paration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | Yes | ■ Other. Specify Credi | t Card | _ | |
| 4.6 | Discover Fin Svcs Llc | Last 4 digits of account number | 1138 | \$ | 1,802.00 |
| | Priority Creditor's Name Po Box 15316 | When was the debt incurred? | Opened 11/20/11 Last Active 11/01/14 | | |
| | Wilmington, DE 19850 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | Полити | , | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | ed claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | | | | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | Yes | Other. Specify Credi | t Card | _ | |
| 4.7 | Fed Loan Serv | Last 4 digits of account number | 0002 | \$ | 2,717.00 |
| | Priority Creditor's Name | | Opened 3/04/10 Last | | |
| | Po Box 60610 Harrisburg, PA 17106 | When was the debt incurred? | Active 8/01/15 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | |
| | ☐ Check if this claim is for a community debt | Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | varation agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | ☐ Yes | Other. Specify | | | |
| | | Empl | oyment | | |

Document Page 23 of 55 Debtor 1 Victor A. Jimenez Case number (if know) 4.8 3,500.00 Fed Loan Serv 0001 Last 4 digits of account number Priority Creditor's Name Opened 3/04/10 Last Po Box 60610 When was the debt incurred? Active 8/01/15 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Employment** 4.9 Flood Brothers 348.00 3800 Last 4 digits of account number \$ Priority Creditor's Name PO Box 4560 When was the debt incurred? 2015 Carol Stream, IL 60197-4560 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Services** Other. Specify 4.1 8.737.00 **Gottlieb Memorial Hospital** Last 4 digits of account number inez Priority Creditor's Name 701 W North Ave. 2012 When was the debt incurred? Melrose Park, IL 60160 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Medical

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Page 24 of 55 Case number (if know) Document

Debtor 1 Victor A. Jimenez

| .1 | Industrial Pharmacy | Last 4 digits of account number | inez | \$ 1,870.00 |
|----|---|--|---|----------------|
| | Priority Creditor's Name 822 W. Washington Blvd. Chicago, IL 60607 | When was the debt incurred? | 2012 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | Ŭ | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Medic | al | |
| 1 | Lonnie Mihin | Last 4 digits of account number | inez | \$ 0.00 |
| | Priority Creditor's Name c/o Dorn Bruce Farrel & Associates 120 N Lasalle #1900 | When was the debt incurred? | 2014 | |
| | Chicago, IL 60602 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | |
| | No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | tial Claim | |
| 1 | Lou Harris Company | Last 4 digits of account number | 5080 | \$ 465.00 |
| | Priority Creditor's Name 1040 S Milwaukee Ave Ste Wheeling, IL 60090 | When was the debt incurred? | Opened 3/13/13 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |

| Debtor | Case 16-00677 Doc 1 Victor A. Jimenez | | ntered 01/11/16 10:17:55 ge 25 of 55 Case number (if know) | Desc Main |
|--------|--|--|--|-----------|
| 200.0. | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | _ | _ | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unse | cured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | - Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a not report as priority claims | separation agreement or divorce that you did | |
| | ■ No | ☐ Debts to pension or profit-s | sharing plans, and other similar debts | |
| | Yes | Other. Specify | ellection Attorney Midwest Clinical | lma |
| 4.1 | Loyola Medicine | Last 4 digits of account num | _{ber} inez | \$ 446.00 |
| | Priority Creditor's Name | Million and a label and a second | | |
| | 2160 S 1st. Ave. Maywood, IL 60153 | When was the debt incurred | ? 2012 | |
| | Number Street City State Zlp Code | As of the date you file, the cl | aim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unse | cured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a not report as priority claims | separation agreement or divorce that you did | |
| | ■ No | ☐ Debts to pension or profit-s | sharing plans, and other similar debts | |
| | Yes | Other. Specify | edical | |
| 4.1 | Midland Funding | Last 4 digits of account num | ber 3853 | \$ 949.00 |
| J | Priority Creditor's Name | | | · |
| | 2365 Northside Dr Ste 30 San Diego, CA 92108 | When was the debt incurred | Opened 6/22/15 Last ? Active 11/01/14 | |
| | Number Street City State Zlp Code | As of the date you file, the cl | aim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | · · | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unse | cured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a not report as priority claims | separation agreement or divorce that you did | |
| | ■ No | ☐ Debts to pension or profit-s | sharing plans, and other similar debts | |
| | Yes | Other. Specify N.A | ctoring Company Account Capital A. | One |
| 4.1 | Midwest Clinical Imaging | Last 4 digits of account num | _{ber} inez | s 465.00 |

Priority Creditor's Name

Entered 01/11/16 10:17:55 Case 16-00677 Desc Main Doc 1 Filed 01/11/16 Page 26 of 55 Case number (if know) Document Debtor 1 Victor A. Jimenez 205 E Butterfield Rd. When was the debt incurred? 2012 #219 Elmhurst, IL 60126 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ☐ Unliquidated

| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
|---|---|---|----|-----------|
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify Medical | | |
| 4.1 7 | Northeastern Illinois University | Last 4 digits of account number inez | \$ | 15,000.00 |
| <u>, </u> | Priority Creditor's Name 5500 N St. Louis Ave. | When was the debt incurred? 2013 | | <u> </u> |
| | Chicago, IL 60625 | As of the date was file the elements of Olympia to the | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | _ | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify Unpaid Tuition | _ | |
| 4.1 8 | Open MRI of Chicago | Last 4 digits of account number inez | \$ | 5,400.00 |
| 0 | Priority Creditor's Name | | · | <u> </u> |
| | 303 East Army Trail Road Suite 110 | When was the debt incurred? 2012 | | |
| | Bloomingdale, IL 60108 | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | | | | |

Official Form 106 E/F

☐ Yes

Other. Specify

Medical

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677

Page 27 of 55 Case number (if know) Document Debtor 1 Victor A. Jimenez

| 4.1 9 | Pro Clinics | Last 4 digits of account number inez | \$ | 549.00 |
|----------|--|---|----|----------|
| U | Priority Creditor's Name 2804 N Laramie Ave. Chicago, IL 60641 | When was the debt incurred? 2012 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | \square Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | d | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify Medical | | |
| 4.2 | Rehab Dynamix LTD | Last 4 digits of account number inez | \$ | 7,668.00 |
| | Priority Creditor's Name 5614 S. Pulaski Rd. Chicago, IL 60629 | When was the debt incurred? 2012 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | _ | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | d | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify Medical | | |
| 4.2 | RJM Pathology | Last 4 digits of account number inez | \$ | 22.00 |
| | Priority Creditor's Name 34520 Eagle Way Chicago, IL 60678 | When was the debt incurred? 2012 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |

| Debtor | Case 16-00677 Doc 1 1 Victor A. Jimenez | | ered 01/11/16 10:17:55 28 of 55 Case number (if know) | Desc Main | |
|--------|--|--|---|-----------|--------|
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | Yes | Other. Specify | al | | |
| 4.2 | Rotorazer, LLC | Last 4 digits of account number | 2822 | \$ | 175.00 |
| | Priority Creditor's Name 1392 Sarah Place Ste. B | When was the debt incurred? | 2015 | · | |
| | Ontario, CA 91761 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | · · | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | a ciaim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep not report as priority claims | aration agreement or divorce that you did | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | Yes | Other. Specify Credi | t | | |
| 4.2 | T-Mobile | Last 4 digits of account number | 4134 | \$ | 972.00 |
| | Priority Creditor's Name | When we the debt in some 10 | 2045 | | |
| | P.O. Box 37380 Albuquerque, NM 87176-7380 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | _ | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sep | aration agreement or divorce that you did | ı | |
| | No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | |
| | Yes | Other. Specify | ces | | |
| 4.2 | Victoria's Secret | Last 4 digits of account number | enez | \$ | 310.00 |

Priority Creditor's Name

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 29 of 55 Case number (if know) Debtor 1 Victor A. Jimenez **Bankruptcy Department** When was the debt incurred? 2015 PO Box 182273 Columbus, OH 43218-2273 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit Other. Specify 4.2 492.00 Village of Villa Park 3003 Last 4 digits of account number \$ 5 Priority Creditor's Name 20 S. Ardmore Avenue When was the debt incurred? 2015 Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Utility Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name Address On which entry in Part 1 or Part2 did you list the original creditor? **Advanced Lab Services** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 200 Larkin Dr. #H Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number Name Address On which entry in Part 1 or Part2 did you list the original creditor? **REHABdynamix** Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 150 Onix Drive Part 2: Creditors with Nonpriority Unsecured Claims Kennett Square, PA 19348 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total claim Domestic support obligations

6a.

0.00

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Page 30 of 55 Case number (if know) Document

Debtor 1 Victor A. Jimenez

| Total claims | | | | | |
|--------------|-----|---|-----|-------------|-----------|
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total Claim | |
| | 6f. | Student loans | 6f. | \$ | 6,217.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 53,353.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$ | 59,570.00 |

| | | DOGUILLE | III Paue 3 LOLDO | |
|---|-------------------------|-------------------|------------------|-----------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Victor A. Jimene | Z | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this |
| | | | | amended fili |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Name Number Street State ZIP Code | | Person o | company with | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|---|-----|----------|--------------|---|-------------------|---|
| Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street City State ZIP Code | 2.1 | | | | | |
| City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Number Street | | Name | | | | |
| Number Street State ZIP Code | | Number | Street | | | _ |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | 2.2 | | | | | <u> </u> |
| City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | |
| City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Nicosia | 04 | | | <u> </u> |
| 2.3 Name | | Number | Street | | | |
| 2.3 Name | | City | | State | ZIP Code | |
| Number Street City State ZIP Code 2.4 Number Street City State ZIP Code 2.5 Number Street Number Street Number Street | 2.3 | | | | | |
| City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Number | Street | | | _ |
| Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | |
| Number Street City State ZIP Code 2.5 Name Number Street | 2.4 | | | | | |
| City State ZIP Code 2.5 Name Number Street | | Name | | | | |
| Number Street Street | | Number | Street | | | |
| Number Street Street | | City | | State | ZIP Code | _ |
| Number Street | 2.5 | | | | | |
| | | Name | | | | |
| City State ZIP Code | | Number | Street | | | _ |
| | | City | | State | ZIP Code | _ |

| | | Docume | <u>nt Page 32 d</u> | of 55 | |
|---------------------------|--|---|---------------------------|--|--|
| Fill in this | information to identify you | r case: | | | |
| Debtor 1 | Victor A limono | 7 | | | |
| Depioi i | Victor A. Jimene | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filir | ng) First Name | Middle Name | Last Name | _ | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | | |
| Case numb | ber | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| Official | l Form 106H | | | | |
| | lule H: Your Cod | lobtors | | | 40/45 |
| Scried | iule n. Toul Cou | ienioi 2 | | | 12/15 |
| ■ No | you have any codebtors? (If | i you are filing a joint case, o | do not list either spouse | as a codebtor. | |
| ☐ Yes | 3 | | | | |
| Arizon | hin the last 8 years, have yo la, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo | a, Nevada, New Mexico, Pu | erto Rico, Texas, Wash | | y states and territories include |
| in line Form out Co | e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor | if that person is a guaran al Form 106E/F), or Sched | tor or cosigner. Make | Sure you have listed the DGG). Use Schedule D, | g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt |
| ľ | Name, Number, Street, City, State and | ZIP Code | | Check all schedule | es that apply: |
| 3.1 | | | | ☐ Schedule D, lin | e |
| | Name | | | □ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | |
| - | Number Street | | | <u> </u> | |
| | City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, lin | e |
| | Name | | | ☐ Schedule E/F, I | ine |
| | | | | ☐ Schedule G, lin | e |
| _ | Number Street | | | | |
| | City | State | ZIP Code | | |

Schedule H: Your Codebtors

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 33 of 55

| Fill | in this information to identify your c | ase: | | | | | | | |
|--------------------|--|---|--|----------|-----------------|-------------------------------------|---------------------------|---|--|
| Del | otor 1 Victor A. Jin | nenez | | | _ | | | | |
| | otor 2 Juse, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| | se number nown) | | | | | | ded filing ment show | ring postpetition chapter of ollowing date: | |
| 0 | fficial Form 106I | | | | | MM / DD | YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | 12/1 | |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11: Describe Employment | are married and not filir r spouse is not filing wi | ng jointly, and your spe th you, do not include | ouse i | s livi natio | ing with you, in on about your s | clude info pouse. If n | rmation about your nore space is needed, | |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debto | r 2 or non | -filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | ■ Em | ■ Employed | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | □ No | ☐ Not employed | | | |
| | employers. | Occupation | Real Estate Agent | <u> </u> | | Custo | Customer Service | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Remax Unlimited | North | wes | st | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 200 E Northwest I Palatine, IL 60067 | | | | | | |
| | | How long employed to | here? 2 Years | | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If y | you have nothing to repo | ort for | any I | ine, write \$0 in the | ie space. I | nclude your non-filing | |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information f | or all e | mplo | oyers for that per | son on the | lines below. If you need | |
| | | | | | | For Debtor 1 | | Debtor 2 or illing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.0 | D \$ | 1,100.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.0 |)_ +\$ _ | 0.00 | |

0.00

1,100.00

Calculate gross Income. Add line 2 + line 3.

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 34 of 55

| Deb | tor 1 | Victor A. Jimenez | - | С | ase nur | mber (if known) | | | | |
|-----|-----------------------------|---|------------|------|----------|-----------------|----------|--------------------------|----------------|--|
| | Cor | ny line 4 hore | 4. | | For De | | | or Debtor on-filing s | spouse | |
| | COL | by line 4 here | 4. | • | Φ | 0.00 | Φ | | ,100.00 | <u>'</u> _ |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 0.00 | \$ | | 320.00 | _ |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | \$ | 0.00 | \$ | | 0.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | \$ | | 0.00 | |
| | 5d. 5e. | Required repayments of retirement fund loans Insurance | 5d. 5e. | | \$ | 0.00 | \$ \$ | | 0.00 | _ |
| | 5e. 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | Ф \$ | | 285.00 0.00 | _ |
| | 5g. | Union dues | 5g. | | \$ —— | 0.00 | \$ | | 0.00 | _ |
| | 5h. | Other deductions. Specify: | 5h. | | \$ | | + \$ | | 0.00 | |
| 6. | Add | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | 9 | \$ | 0.00 | \$ | | 605.00 | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | 9 | \$ | 0.00 | \$ | | 495.00 | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | . ; | \$ | 3,169.00 | \$ | | 0.00 | _) |
| | 8b. | Interest and dividends | 8b. | . : | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | | \$ | 0.00 | \$ | | 0.00 | |
| | 8e. | Social Security | 8e. | . : | \$ | 0.00 | \$ | | 0.00 | <u>) </u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | ; | \$ | 0.00 | \$ | | 0.00 |) |
| | 8g. | Pension or retirement income | 8g. | . : | \$ | 0.00 | \$ | | 0.00 |) |
| | 8h. | Other monthly income. Specify: | _ 8h. | .+ : | \$ | 0.00 | + \$ | | 0.00 | <u>) </u> |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 3,169.00 | \$ | | 0.0 | 00 |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 2 1 | 69.00 + \$ | | 495.00 | = \$ | 3,664.00 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ | 3, | Ψ_ | | 493.00 | | 3,004.00 |
| 11. | Star Incli othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depe | | | | | | | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | \$Combi | 3,664.00 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | | ly income |
| | _ | Ver Fordels | | | | | | | | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 35 of 55

| SIII | in this informat | tion to identify yo | our case: | | | 1 | | | | |
|-------|-----------------------------|------------------------------------|----------------|---|-----------------------|-------------|-----------|--------------------|---|------|
| Deb | | Victor A. Jim | | | | Ch | eck if tl | his is: | | |
| | | V10101 74. 0111 | 101102 | | | | An a | mended filing | | |
| Debi | tor 2 buse, if filing) | | | | | | | | ving postpetition chap the following date: | ter |
| Unite | ed States Bankr | uptcy Court for the | · NORTH | ERN DISTRICT OF ILLIN | OIS | | MM | / DD / YYYY | | |
| | | apto, court or the | | | | | , | 22, | | |
| 1 | e number nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | | | 12/1 |
| info | rmation. If m | | eded, atta | If two married people and the shorther sheet to this in. | | | | | | |
| Part | t 1: Descr | ibe Your House | hold | | | | | | | |
| 1. | Is this a join | t case? | | | | | | | | |
| | ■ No. Go to | | in a canar | ate household? | | | | | | |
| | □ res. Doe : | | iii a sepai | ate nousenoid? | | | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expense</i> s | s for Separate House | ehold of De | ebtor 2. | | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | | Dependent's ige | Does dependent live with you? | |
| | Do not state | | | | | | | | □ No | |
| | dependents | names. | | | | | | | ☐ Yes ☐ No | |
| | | | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes ☐ No | |
| | | | | | | | | | ☐ Yes | |
| 3. | | enses include f people other tl | han | No | | | | | | |
| | | d your depende | | Yes | | | | | | |
| Esti | imate your ex | | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | | | |
| | | | | government assistance i luded it on <i>Schedule I:</i> \ | | | | | | |
| | ficial Form 10 | | d nave inc | luded it on Schedule I: | rour income | | | Your expe | enses | |
| 4. | | r home owners | | ses for your residence. I | nclude first mortgage | e 4. | \$ | | 1,274.00 | |
| | If not includ | ed in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. | | | 0.00 | |
| | | | | pkeep expenses | | 4c. | | | 85.00 | |
| 5. | | owner's associat | | dominium dues our residence, such as ho | me equity loans | 4d. 5. | | | 0.00 | |
| ٥. | , wantional II | tgage payint | J. 113 101 yo | a solucilos, sucil as IIC | The equity loans | ٥. | Ψ | | 0.00 | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 36 of 55

| Deb | otor 1 | Victor A. | Jimenez | Case | num | ber (if known) | |
|-----|---------|---------------|--|-------------------------|------------|----------------|------------------------------|
| 6. | Utiliti | ies: | | | | | |
| | 6a. | | heat, natural gas | | 6a. | \$ | 180.00 |
| | 6b. | Water, sev | wer, garbage collection | | 6b. | \$ | 35.00 |
| | 6c. | Telephone | e, cell phone, Internet, satellite, and cable services | | 6c. | \$ | 195.00 |
| | 6d. | Other. Spe | ecify: | | 6d. | \$ | 0.00 |
| 7. | Food | | ekeeping supplies | | 7. | \$ | 500.00 |
| 8. | | | hildren's education costs | | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laundi | ry, and dry cleaning | | 9. | \$ | 75.00 |
| 10. | Perso | onal care p | roducts and services | | 10. | \$ | 80.00 |
| 11. | Medic | cal and der | ntal expenses | | 11. | \$ | 65.00 |
| 12. | | | Include gas, maintenance, bus or train fare. | | | | |
| | | | ar payments. | | 12. | \$ | 325.00 |
| 13. | Enter | rtainment, o | clubs, recreation, newspapers, magazines, and b | ooks | 13. | \$ | 70.00 |
| 14. | Chari | itable conti | ributions and religious donations | | 14. | \$ | 60.00 |
| 15. | Insur | | | | | | |
| | | | surance deducted from your pay or included in lines | | _ | _ | |
| | | Life insura | | | 5a. | · | 0.00 |
| | 15b. | Health insi | urance | | 5b. | · <u> </u> | 0.00 |
| | | Vehicle ins | | | 15c. | • | 120.00 |
| | 15d. | Other insu | rance. Specify: | 1 | 5d. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or included in lir | | | | |
| | Speci | , | | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | | - - | • | |
| | | | ents for Vehicle 1 | | 7a. | · | 520.00 |
| | | | ents for Vehicle 2 | | 7b. | · | 0.00 |
| | | Other. Spe | - | | 17c. | · | 0.00 |
| | | Other. Spe | · · · · · · · · · · · · · · · · · · · | | 7d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you d | | 18. | \$ | 0.00 |
| 10 | | | your pay on line 5, <i>Schedule I, Your Income</i> (Offic s you make to support others who do not live witl | | 10. | \$ | 0.00 |
| 13. | Speci | | s you make to support others who do not live with | • | 19. | Ψ | 0.00 |
| 20 | • | , | erty expenses not included in lines 4 or 5 of this | | | ur Income | |
| 20. | | | s on other property | | 20a. | | 0.00 |
| | | Real estate | | | 20b. | | 0.00 |
| | | | nomeowner's, or renter's insurance | | 20c. | · | 0.00 |
| | | | ice, repair, and upkeep expenses | | 20d. | · <u> </u> | 0.00 |
| | | | er's association or condominium dues | | 20e. | | 0.00 |
| 21 | | | ers association or condominium dues | | 21. | | |
| ۷١. | Other | r: Specify: | | | ۷١. | +Φ | 0.00 |
| 22. | Calcu | ulate your r | monthly expenses | | | | |
| | 22a. / | Add lines 4 | through 21. | | | \$ | 3,584.00 |
| | 22b. (| Copy line 22 | 2 (monthly expenses for Debtor 2), if any, from Official | al Form 106J-2 | | \$ | <u> </u> |
| | 22c. A | Add line 22a | a and 22b. The result is your monthly expenses. | | | \$ | 3,584.00 |
| | | | | | | <u> </u> | 3,004.00 |
| 23. | | | monthly net income. | | | | |
| | | . , | 12 (your combined monthly income) from Schedule I | | 23a. | | 3,664.00 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 2 | 23b. | -\$ | 3,584.00 |
| | | | | | | | |
| | 23c. | | our monthly expenses from your monthly income. | 2 | 23c. | \$ | 80.00 |
| | | rne result | is your monthly net income. | 2 | -00. | T | 30.00 |
| 24. | Do vo | ou expect a | an increase or decrease in your expenses within | the vear after you file | this | form? | |
| | | | ou expect to finish paying for your car loan within the year or | | | | ase or decrease because of a |
| | modifi | cation to the | terms of your mortgage? | | | | |
| | ■ No | ٥. | | | | | |
| | ☐ Ye | es. | Explain here: | | | | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 37 of 55

| Debtor 1 | | | | |
|---|--|----------------------------|---|---|
| | Victor A. Jimene | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | Γ OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| two married p ou must file th | eople are filing togethe | er, both are equally respo | | ormation. g a false statement, concealing property, or |
| ears, or both. 1 | 18 U.S.C. §§ 152, 1341, ' | | kruptcy case can result in fines | up to \$250,000, or imprisonment for up to 20 |
| · | 18 U.S.C. §§ 152, 1341, | | kruptcy case can result in fines | up to \$250,000, or imprisonment for up to 20 |
| Sig | ın Below | 1519, and 3571. | kruptcy case can result in fines | |
| Sig | ın Below | 1519, and 3571. | | |
| Sig Did you pa ■ No | ın Below | 1519, and 3571. | rney to help you fill out bankrup . Attach <i>Ba</i> | |
| Did you pa No Yes. Under pena | gn Below ay or agree to pay some Name of person | 1519, and 3571. | rney to help you fill out bankrup . Attach <i>Ba</i> | tcy forms? nkruptcy Petition Preparer's Notice, Declaration, ure (Official Form 119). |
| Did you pa No Yes. Under penathat they ar | n Below ay or agree to pay some Name of person alty of perjury, I declare | 1519, and 3571. | rney to help you fill out bankrup . Attach Ba and Signati | tcy forms? nkruptcy Petition Preparer's Notice, Declaration, ure (Official Form 119). |
| Did you pa No Yes. Under penathat they ar X /s/ Victor | n Below ay or agree to pay some Name of person alty of perjury, I declare true and correct. | 1519, and 3571. | rney to help you fill out bankrup . Attach Ba and Signation | nkruptcy Petition Preparer's Notice, Declaration, ure (Official Form 119). his declaration and |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 38 of 55

| Eill in | this infor | nation to identify you | | | | |
|------------------|--------------------|----------------------------------|--|---|--|---|
| | | nation to identify your | | | | |
| Debto | or 1 | Victor A. Jimene | Middle Name | Last Name | | |
| Debto | or 2 | | | | | |
| (Spouse | e if, filing) | First Name | Middle Name | Last Name | | |
| United | d States Ba | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Case (if know | number _ | | | | _ | Check if this is an mended filing |
| Stat | complete a | and accurate as possi | | re filing together, both are | ankruptcy equally responsible for sup | |
| | | n). Answer every ques | | uns form. On the top of any | additional pages, write you | ii iiailie aliu case |
| Part 1 | | Details About Your Ma | rital Status and Where You | Lived Before | | |
| ı. v | riiai is you - | r current mantai statu | 5 f | | | |
| | Married Not ma | | | | | |
| 2. D | uring the l | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| • | ■ No ■ Yes. Lis | st all of the places you l | ived in the last 3 years. Do no | ot include where you live now | : | |
| I | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No ■ Yes. Ma | ake sure you fill out <i>Sch</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Part 2 | Explai | in the Sources of You | r Income | | | |
| F | ill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| |] No | | | | | |
| | Yes. Fil | I in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | | ■ Wages, commissions, bonuses, tips | \$24,300.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677

Page 39 of 55
Case number (if known) Document Debtor 1 Victor A. Jimenez

| | | | Debtor 1 | | Debtor 2 | |
|----|-----------------|---|--|---|--|---|
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | | ■ Wages, commissions, bonuses, tips | \$79.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | | | ■ Wages, commissions, bonuses, tips | \$10,200.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | ■ No | source and the gross in | come from each source separat | ely. Do not include income t | nat you listed in line 4. | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below | Gross income (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| Pa | rt 3: List | : Certain Payments Yo | u Made Before You Filed for E | Bankruptcy | | |
| 6. | Are either No. | Neither Debtor 1 nor individual primarily for During the 90 days be No. Go to line Yes List below | v each creditor to whom you paid | mer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,225* or more i | of \$6,225* or more? | he total amount you |
| | | not includ | le payments to an attorney for the ent on 4/01/16 and every 3 years | nis bankruptcy case. | •• | • |

| | domestic support obligation | • | | you paid that creditor. Do not Also, do not include payments to | an |
|-----------------------------|-----------------------------|--------------|------------|--|----|
| Creditor's Name and Address | Dates of payment | Total amount | Amount you | Was this payment for | |

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|--|------------------|-------------------|-------------------------|--|
| Bk Of Amer 1800 Tapo Canyon Rd Simi Valley, CA 93063 | 09/2015 | \$1,274.00 | \$148,317.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |

□ No.

Go to line 7.

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Document

Page 40 of 55
Case number (if known) Debtor 1 Victor A. Jimenez

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|-----|--|---|---|---|--|
| | Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523 | Most recent 3 months | \$1,560.00 | \$21,464.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |
| 7. | Within 1 year before you filed for bankruptul Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen control, or owner of 20% o | eral partners; partner r more of their voting | rships of which yo g securities; and a | u are a general partner; corporations ny managing agent, including one for |
| | NoYes. List all payments to an insider | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| 8. | Within 1 year before you filed for bankrupter insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider | | ments or transfer a | ny property on ad | ccount of a debt that benefited an |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | |
| 9. | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the case |
| | Discover Card Services v. Victor Jiminez | Debt Collection | | | ☐ Pending ☐ On appeal ☐ Concluded |
| | | | | | Judgment |
| | Victor Jiminez v. Lonnie Mihin - Case: 12 L 014157 | Personal Injury Claim | Circuit Court C Illinois | ook County, | ☐ Pending ☐ On appeal ☐ Concluded |
| | | | | | Arbitration Award for Defendant |

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677

Page 41 of 55 Case number (if known) Document Debtor 1 Victor A. Jimenez

| 10. | Within 1 year before you filed for bankruptc Check all that apply and fill in the details below | y, was any of your property repossessed, foreclosed | d, garnished, attached | l, seized, or levied? |
|-----|---|---|---|---------------------------|
| | ■ No | | | |
| | Yes. Fill in the information below. | | D (| |
| | Creditor Name and Address | Describe the Property | Date | Value of the property |
| | | Explain what happened | | , |
| 11. | accounts or refuse to make a payment became No | cy, did any creditor, including a bank or financial in use you owed a debt? | stitution, set off any a | mounts from your |
| | Yes. Fill in the details. | Describe the action the graditar took | Data action was | Amarint |
| | Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
| 12. | Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an □ No □ Yes | y, was any of your property in the possession of an other official? | assignee for the bene | fit of creditors, a |
| | | | | |
| Par | t 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | cy, did you give any gifts with a total value of more to Describe the gifts | than \$600 per person? Dates you gave | Value |
| | per person | Describe the gifts | the gifts | value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankrupt | cy, did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity |
| | No | | | |
| | Yes. Fill in the details for each gift or cont | | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | I Describe what you contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | |
| 15. | or gambling? | y or since you filed for bankruptcy, did you lose any | thing because of thef | t, fire, other disaster, |
| | Yes. Fill in the details. | | | |
| | how the loss occurred Inc | escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or pre | y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require | , | ty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Case 16-00677 Page 42 of 55
Case number (if known) Document

Debtor 1 Victor A. Jimenez

| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and va transferred | alue of any prop | perty | Date payment or transfer was made | Amount of payment |
|-----|--|--|--------------------------|------------------|---|---|
| | Fonfrias Law Group, LLC 70 West Madison Suite 1400 Chicago, IL 60602 | \$2,000.00 | | | 11/2015 | \$2,000.00 |
| 17. | Within 1 year before you filed for bankruptcy, described to help you deal with your creditors of Do not include any payment or transfer that you listed No | or to make payments | | | or transfer any proper | ty to anyone who |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and vatransferred | alue of any prop | perty | Date payment or transfer was made | Amount of payment |
| | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi | ness or financial affai | rs? | | | |
| | Include both outright transfers and transfers made include gifts and transfers that you have already lis No No | | | security interes | st or mortgage on your | property). Do not |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and va property transferre | | | any property or received or debts change | Date transfer was made |
| | Person's relationship to you | | | | | |
| | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No. | | property to a s | self-settled tru | ust or similar device o | of which you are a |
| | Yes. Fill in the details. | | | | | |
| | Name of trust | Description and va | alue of the prop | erty transferr | red | Date Transfer was made |
| Par | 8: List of Certain Financial Accounts, Instru | ıments, Safe Deposit | Boxes, and Sto | rage Units | | |
| | Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or o | - | | | | |
| | houses, pension funds, cooperatives, associat No | | , | | ,, | |
| | Yes. Fill in the details. | | | | | |
| | | ast 4 digits of ecount number | Type of accou instrument | clo mo | ate account was osed, sold, oved, or unsferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | r before you filed for I | bankruptcy, an | y safe deposi | t box or other deposit | ory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, Str State and ZIP Code) | | Describe the | contents | Do you still have it? |
| | | | | | | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Page 43 of 55 Document ase number (*if known*) Debtor 1 Victor A. Jimenez 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy No Yes. Fill in the details. Do you still Name of Storage Facility Describe the contents Who else has or had access have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City,

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 44 of 55 Case number (if known)

| | ☐ A partner in a partnership | | | | | | |
|---------------------|--|--|---|--|--|--|--|
| | ☐ An officer, director, or managing ex | ☐ An officer, director, or managing executive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the votir | ng or equity securities of a corporation | | | | | |
| | No. None of the above applies. Go to | Part 12. | | | | | |
| | ☐ Yes. Check all that apply above and fil | II in the details below for each business. | | | | | |
| | Business Name Address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. | | | | |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Dates business existed | | | | |
| 28. | Within 2 years before you filed for bankrup institutions, creditors, or other parties. | tcy, did you give a financial statement to ar | nyone about your business? Include all financial | | | | |
| | No | | | | | | |
| | Yes. Fill in the details below. | 5 | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | | | |
| Par | rt 12: Sign Below | | | | | | |
| are to with 18 U | true and correct. I understand that making a h a bankruptcy case can result in fines up to U.S.C. §§ 152, 1341, 1519, and 3571. Victor A. Jimenez | a false statement, concealing property, or o \$250,000, or imprisonment for up to 20 year | declare under penalty of perjury that the answers btaining money or property by fraud in connectior ars, or both. | | | | |
| | ctor A. Jimenez gnature of Debtor 1 | Signature of Debtor 2 | | | | | |
| Dat | ite January 11, 2016 | Date | | | | | |
| Did : ■ N □ Y | | ent of Financial Affairs for Individuals Filin | g for Bankruptcy (Official Form 107)? | | | | |
| ■ N | | ot an attorney to help you fill out bankruptcy | | | | | |

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 45 of 55

| Fill in this inform | mation to identify your case: | | |
|--------------------------------------|---|---|---|
| Debtor 1 | Victor A. Jimenez | | |
| Debtor 2 | First Name Middle Name | Last Name | |
| (Spouse if, filing) | First Name Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: NORTHERN DIS | STRICT OF ILLINOIS | |
| Case number(if known) | _ | | ☐ Check if this is an amended filing |
| Official Fo | | viduals Filing Under Chapter | r 7 12/15 |
| | ividual filing under chapter 7, you must f e claims secured by your property, or | ill out this form if: | |
| ■ you have leas You must file thi | sed personal property and the lease has s form with the court within 30 days afte ever is earlier, unless the court extends t | not expired. r you file your bankruptcy petition or by the date set t he time for cause. You must also send copies to the o | |
| | eople are filing together in a joint case, b | oth are equally responsible for supplying correct info | ormation. Both debtors must |
| • | and accurate as possible. If more space our name and case number (if known). | is needed, attach a separate sheet to this form. On th | e top of any additional pages, |
| Part 1: List Yo | our Creditors Who Have Secured Claims | | |
| 1. For any credite | • | D: Creditors Who Have Claims Secured by Property (| Official Form 106D), fill in the |
| Identify the cre | editor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's B name: | Sk Of Amer | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | | ☐ Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property securing debt: | IL 60641 Cook County Debtor Residence - 2074sf - 4 | Retain the property and [explain]: | |
| 3 | Bdrm - 2 Bath Location: 3012 N. Kenneth Ave., Chicago IL 60641 | Debtor will continue regular monthly payments. | |
| Creditor's C | Office of Housing FHA Comptroller | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | 3012 N. Kenneth Ave. Chicago, | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property securing debt: | IL 60641 Cook County Debtor Residence - 2074sf - 4 | ■ Retain the property and [explain]: | |
| - | Bdrm - 2 Bath Location: 3012 N. Kenneth Ave., Chicago IL 60641 | Debtor will pay according to the terms of the contract. | |
| Creditor's T | oyota Motor Credit | ☐ Surrender the property. | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 46 of 55

| B8 (Form 8) (12/08) name: Description of property Good Condition securing debt: | Retain the property and [explain]: | Page 2 ■ Yes |
|---|---|---|
| Part 2: List Your Unexpired Personal Property Les For any unexpired personal property lease that you in the information below. Do not list real estate lease You may assume an unexpired personal property lea | listed in Schedule G: Executory Contracts and Une es. Unexpired leases are leases that are still in effe | ct; the lease period has not yet ended. |
| Describe your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: Description of leased Property: | | □ No |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Lessor's name: Description of leased Property: | | □ No □ Yes |
| Part 3: Sign Below Under penalty of perjury, I declare that I have indicate property that is subject to an unexpired lease. | | at secures a debt and any personal |
| X /s/ Victor A. Jimenez Victor A. Jimenez Signature of Debtor 1 | XSignature of Debtor 2 | |
| Date January 11, 2016 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-00677 Doc 1 Filed 01/11/16 Entered 01/11/16 10:17:55 Desc Main Document Page 51 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Victor A. Jimenez | | Case No. | | |
|---------|--|--|--|-----------------------------------|-----|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR DE | CBTOR(S) | |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fipe rendered on behalf of the debtor(s) in contemplation | iling of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered or | to |
| | For legal services, I have agreed to accept | | \$ | 2,000.00 | |
| | Prior to the filing of this statement I have received | ed | \$ | 2,000.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. 7 | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. 7 | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed con | mpensation with any other persor | unless they are mem | bers and associates of my law fi | rm. |
| I | ☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the | | | | 1 |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ets of the bankruptcy | ease, including: | |
| t | a. Analysis of the debtor's financial situation, and reposition. Preparation and filing of any petition, schedules, so Representation of the debtor at the meeting of credit. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on head of the secure of the secur | tatement of affairs and plan whic ditors and confirmation hearing, a preduce to market value; ex tions as needed; preparation | h may be required; and any adjourned hea emption planning; | rings thereof; | |
| б. I | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any other adversary proceeding. | fee does not include the followin dischargeability actions, jud | g service: icial lien avoidanc | es, relief from stay actions | or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of ankruptcy proceeding. | any agreement or arrangement for | or payment to me for i | epresentation of the debtor(s) in | 1 |
| Já | anuary 11, 2016 | /s/ Richard Fonfi | | | |
| D_{i} | ate | Richard Fonfrias Signature of Attorn | | | |
| | | Fonfrias Law Gro | oup, LLC | | |
| | | 70 West Madisor Suite 1400 | 1 | | |
| | | Chicago, IL 6060 | | | |
| | | 3129690730 Fax rfonfrias2025@g | | | |
| | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Victor A. Jimenez | | Case No. | |
|-------|--|---|-----------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VE | RIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of C | Creditors: | 29 |
| | The above-named Debtor(s) I (our) knowledge. | hereby verifies that the list of credito | ors is true and | correct to the best of my |
| Date: | January 11, 2016 | /s/ Victor A. Jimenez Victor A. Jimenez Signature of Debtor | | |

Advanced Lab Services 501 Elmwood Ave. Sharon Hill, PA 19079

Advanced Lab Services 200 Larkin Dr. #H Wheeling, IL 60090

Bk Of Amer 1800 Tapo Canyon Rd Simi Valley, CA 93063

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Cbna Po Box 6497 Sioux Falls, SD 57117

Chase 11200 W Parkland Ave PO Box 3139 Milwaukee, WI 53201-3139

Chase Card Po Box 15298 Wilmington, DE 19850

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Flood Brothers PO Box 4560 Carol Stream, IL 60197-4560

Gottlieb Memorial Hospital 701 W North Ave. Melrose Park, IL 60160

Industrial Pharmacy 822 W. Washington Blvd. Chicago, IL 60607

Lonnie Mihin c/o Dorn Bruce Farrel & Associates 120 N Lasalle #1900 Chicago, IL 60602

Lou Harris Company 1040 S Milwaukee Ave Ste Wheeling, IL 60090

Loyola Medicine 2160 S 1st. Ave. Maywood, IL 60153

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Midwest Clinical Imaging 205 E Butterfield Rd. #219 Elmhurst, IL 60126

Northeastern Illinois University 5500 N St. Louis Ave. Chicago, IL 60625

Office of Housing FHA Comptroller Director of Mortgage Insurance Acc. 451 Seventh Street SW Washington, DC 20410

Open MRI of Chicago 303 East Army Trail Road Suite 110 Bloomingdale, IL 60108

Pro Clinics 2804 N Laramie Ave. Chicago, IL 60641 Rehab Dynamix LTD 5614 S. Pulaski Rd. Chicago, IL 60629

REHABdynamix 150 Onix Drive Kennett Square, PA 19348

RJM Pathology 34520 Eagle Way Chicago, IL 60678

Rotorazer, LLC 1392 Sarah Place Ste. B Ontario, CA 91761

T-Mobile P.O. Box 37380 Albuquerque, NM 87176-7380

Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523

Victoria's Secret Bankruptcy Department PO Box 182273 Columbus, OH 43218-2273

Village of Villa Park 20 S. Ardmore Avenue Villa Park, IL 60181